

State of South Dakota



Candidate's or Committee's Report of Receipts and Expenditures

Candidates and candidate committees: File in the office where you filed your nominating petition.

PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office,
500 E Capitol Ave., Pierre, SD 57501-5070

RECEIVED

NOV 04 2004

S.D. SEC. OF STATE

See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.

Name of Candidate or Committee Lake County DemocratsComplete Mailing Address PO Box 176 Madison, SD 57042Name of Person Making Report Scott Parsley Daytime Phone Number 256-8004

If you are a candidate, what office are you seeking? _____

If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.

Type of Report (See pages 4 & 5 of Guideline Book) Political Committees county Party Org.For Reporting Period Ending (See pages 4 & 5 of Guideline Book) 10/23/04*The following verification must be completed before submitting report.*

VERIFICATION OF PERSON MAKING REPORT

I Scott Parsley (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.Date: 11/1/04

Scott Parsley Treasurer
 Candidate Signature or
 Signature of Committee Treasurer or Chairperson

Revised July 2001

Filed this 4th day of
November 2004
Chi Nelson
 SECRETARY OF STATE

\$

Name of Candidate or Committee: _____

For the reporting period ending: _____

Schedule B - Fund-Raising Events Proceeds

List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor gives more than \$100 or their contribution results in their aggregate being more than \$100 in the calendar year, those contributions must be itemized on Schedule A.

Type or Name of Event	Net Proceeds

Total: _____

Schedule C - In Kind Contributions

Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported.

Nature of Non-Cash Contribution	Name, Residence Address & Place of Employment	Estimated Value

Total: _____

Schedule D - Other Income

Use this schedule to report any refunds, interest earned or other income which is not a direct contribution.

Source of Income	Amount

Total: _____

~~120127~~
1501 26

Name of Candidate or Committee: _____

For the reporting period ending: _____

Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

[illegible]

Total Obligations: _____

Name of Candidate or Committee: Lake County Democrats

For the reporting period ending: _____

Summary Page

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

1. Amount on hand, if any, at the beginning of the reporting period:

\$ 974 54

2. Receipts

1338 77 54

Schedule A - Direct Contributions

\$ ~~1340 48~~

Schedule B - Fund-Raising Events

\$ _____

Schedule C - In Kind Contributions

\$ _____

Schedule D - Other Income

\$ _____

Total of all Receipts

\$ _____

1338 77

~~1340 48~~

3. Total Monetary Receipts (A+B+D)

\$ ~~1340 48~~

4. Candidate's Personal Contribution to Own Campaign

\$ _____

5. Monetary Loans to Candidate or Committee During Reporting Period

\$ _____

6. Monetary Loans Repaid During Reporting Period

\$ 26

7. Expenditures - Schedule E

\$ ~~1561 26~~

8. Unpaid Obligations - Schedule F

\$ _____

9. Amount on hand at the close of this reporting period. *

This should equal lines (1+3+4+5) - (6+7)

\$ ~~974 54~~
752 05

1

1910

1911

1912

1913

1914